## **BEST AVAILABLE COPY**

PATENT APPLICATION FEE DETERMINATION RECOR					Application or Docket Number  SOJ 77 - 1767					
		S FILED - PAR (Column 1)	TI	mn 2)	SMAL TYPE	ΤEI		OR	OTHER SMALL I	THAN
TC	TAL CLAIMS	40	_		RA	TE	FEE		RATE	FEE
FOR		. NUMBER FILED	NUMB	ER EXTRA	BASIC	FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS		1/5 minus 20	)= • 2	5	X\$	9=		OR	X\$18=	450
INC	DEPENDENT CLAIMS	3 minus 3			X4	2=		OR	X84=	
MULTIPLE DEPENDENT CLAIM PRESENT				+14	0=		OR			
* If the difference in column 1 is less than zero, enter *0* in column 2					TO	TAL		OR	TOTAL	1190
6-10-05 (Column 1) (Column 2) (Column 3)					SM	ALL I	ENTITY	OR	OTHER SMALL	
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	PR	IIGHEST IUMBER EVIOUSLY AID FOR	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total · 45	Minus **	45	E	X\$	9=		OR	X\$18=	:
MEN	Independent * 2	Minus ***	3	5	X4	2=		OR	X84=	
4	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				111				<b>▲280=</b>	

(Column 1) (Column 2) (Column 3) HIGHEST CLAIMS REMAINING NUMBER PRESENT PREVIOUSLY AFTER EXTRA AMENDMENT PAID FOR AMENDMENT Minus Total Independent Minus 3 FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM

RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE			
X\$ 9=		OR	X\$18=				
X42=		OR	X84=	•			
+140=		OR	+280=				
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE				

OR ADDIT. FEE

TOTAL

ADDIT. FEE

		(Column 1)		(Column 2)	(Column 3)		
ENTC	CLAIMS REMAINING		2,	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		
AMENDMENT	Total	•	Minus	**	2		
ŽĘ,	Independent	•	Minus	***	E.		
₹	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						

	RATE	TIONAL FEE		RATE	TIONAL FEE
-	X\$ 9=		OR	X\$18-	
	X42=		OR	X84=	
	+140=		OR	+280=	
1	TOTAL ADDIT, FEE		OR	TOTAL ADDIT. FEE	

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\*If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

\*\*If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

FORM PTO-875 (Rev. 8/01)

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